



CITY OF SUGAR LAND

POLICE DEPARTMENT

CITIZEN'S COMPLAINT FORM

To file a complaint, please complete all the items on this form describing briefly the incident that involved you and an officer of the Sugar Land Police Department. This form must be notarized; notary service is available at the office of Professional Standards. An investigator in the office of the Professional Standards will review the completed form and speak with you. You may also mail the form to:



**Office of Professional Standards
Sugar Land Police Department
P. O. Box 110
Sugar land, TX 77487**

Your Name: _____ Today's Date: _____

RACE

☐ American Indian ☐ Hispanic
☐ Asian/Filipino ☐ Anglo
☐ African-American ☐ Other

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

DOB: _____ Sex: Male ☐ Female ☐

Provide as much information as you can about the incident.

Date of Incident: _____ Time (A.M. or P.M.) _____ Place: _____

Name of Officer(s) involved: _____ Badge Number of Officer: _____

_____ Badge Number of Officer: _____

Officer's Race, Ethnicity: _____

(1) Name of Witness: _____

Address: _____

Home Phone Number: _____ Work/Other Phone Number: _____

(2) Name of Witness: _____

Address: _____

Home Phone Number: _____ Work/Other Phone Number: _____

Use the space provided on the other side of this form to describe what occurred.

